



Virg Bernero, Mayor

LANSING POLICE DEPARTMENT RECORD DISCLOSURE REQUEST

Freedom of Information Act (FOIA)

120 W. Michigan Avenue

Lansing, MI 48933

Phone: 517-483-4680

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Email: LPD.FOIA@lansingmi.gov



Mike Yankowski, Chief

Request taken by: _____ FOIA # _____

PLEASE PRINT CLEARLY

NAME OF REQUESTOR: _____

STREET ADDRESS: _____

Apt/Lot: _____

CITY: _____ State: _____ Zip Code: _____

PHONE: _____

EMAIL ADDRESS: _____

(If you want to be notified via EMAIL when your request is ready to be picked up)

PLEASE READ BEFORE SIGNING:

To comply with State and Federal Laws, information contained in a public record may be redacted or denied. In some cases redactions may be extreme. I understand by signing below, I assume full responsibility for paying any cost involved in retrieving, copying and processing the documents requested.

Signature of Requestor: _____ Date: _____

Type of Request: Incident Report ☐ Video ☐ Other ☐ _____

COMPLAINT NUMBER(S): _____

TYPE OF INCIDENT: _____

ACCUSED NAME: _____ DOB: _____

VICTIM NAME: _____ DOB: _____

LOCATION OF INCIDENT: _____

DATE and TIME OF INCIDENT: _____

ADDITION INFORMATION: _____

NOTE: COMPLETED FORM MUST BE RETURNED BY MAIL, EMAIL or FAX